

**CERTIFICATION OF WORK
SERVICE CALL**

(To be completed by the Contractor and saved in the Contractor's CMMS)

FACID/Building: PA118 Date of Visit: 12-18-18

Contractor Personnel on Site:

- | | |
|----------------------|----------|
| 1. <u>Rick Lance</u> | 4. _____ |
| 2. _____ | 5. _____ |
| 3. _____ | 6. _____ |

Service Call Number

CSS# 16602 WO# 6828

Description of Repairs

Replaced internal parts on a flushometer
for a urinal in mens room in
office

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: Richard Lance Date: 12-18-18

Signed: Richard J Lance

To be signed by Facility Manager:

By signing the Certification of Work, the said government representative signature does not constitute acceptance of any work performed by the contractor, it only acknowledges that the contractor was on-site during the identified timeline:

Print Name/Rank: Benson, Kenneth Date: 18 Dec 2018

Signed: Kenneth Benson

E-Mail: _____



KOHLER

